

FORM TO BE USED BY A PRISONER FILING A COMPLAINT
UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. §1983

FILED _____ ENTERED _____
LODGED _____ RECEIVED _____

DEC 7 2016

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF MARYLAND

AT BALTIMORE
CLERK U.S. DISTRICT COURT
DISTRICT OF MARYLAND
BY _____ DEPUTY

Carey Anderson #329743-#1803741

ECI

30420 REVELLS NECK RD.

WESTOVER, MD. 21890

(Full name, prison identification
number and address of the plaintiff)

v.

Civil Action No. PX-16-3920
(Leave blank. To be filled in by Court.)

B. SHREAVES CO II OFC. Bayles CO II

ECI - Employee 4-12 PM SHIFT

30420 REVELLS NECK RD.

WESTOVER, MD. 21890

(Full name and address of the defendant(s))

COMPLAINT

I. Previous lawsuits

- A. Have you filed other cases in state or federal court dealing with the same facts as in this case or against the same defendants?

YES [] NO [✓]

- B. If you answered YES, describe that case(s) in the spaces below.

1. Parties to the other case(s):

Plaintiff: _____

Defendant(s): _____

2. Court (if a federal court name the district; if a state court name the city or county): _____
3. Case No.: _____
4. Date filed: _____
5. Name of judge that handled the case: _____
6. Disposition (won, dismissed, still pending, on appeal): _____

7. Date of disposition: _____

II. Administrative proceedings

- A. If you are in a Division of Correction facility, did you file an administrative remedy procedure request under DCD 185-001, et seq.?

YES ☒ NO ☐

1. If you answered YES:

a. What was the result? DISMISSED WITHOUT PREJUDICE,
UNDER ILL INVESTIGATION.

- b. Did you appeal to the Commissioner?

YES ☒ NO ☐

2. If you answered NO to either of the questions above, explain why you did not file an administrative remedy procedure request or an appeal to the Commissioner. _____

3. Did you file any other type of administrative complaint such as an appeal to

the warden of an adjustment decision or a decision to withhold mail, a complaint to the Sundry Claims Board, etc.?

YES [] NO [✓]

4. If you answered YES, explain what you filed and what was the result.

- B. If you are not in a Division of Correction facility, is there a grievance procedure at your institution?

YES [] NO []

If your answer is YES:

1. Did you file a grievance?

YES [] NO []

2. If you filed a grievance what was the result? _____

3. If you did not file a grievance explain why not? _____

III. Statement of claim

(Briefly state the facts of your case. Include dates, times, and places. Describe what each defendant did or how he/she is involved. If you are making a number of related claims, number and explain each claim in a separate paragraph.)

^{APPROX. 10:00 PM}
ON APR. 5, 2016 I WAS ASSAULTED BY OFC. STREAVES AND OFC. PROYLES
WHILE I WAS ON LOCK UP, AND BOTH OFC.'S MADE FALSE STATEMENTS TO COVER
UP THEIR ACTIONS. OFC. STREAVES TWISTED MY ARM AS IF HE WAS TRYING TO
BREAK MY ARM THROUGH THE SLOT, WHILE THIS OFC. WAS TWISTING MY ARM IN
A VIOLENT MANNER, OFC. PROYLES WAS STABBING ME WITH THE LOCK KEY.
I SUFFER SEVERE DAMAGE TO MY SHOULDER & HAND, DUE TO THESE OFFICER'S
ASSAULT.

IV. Relief

(State briefly what you want the Court to do for you)

I WOULD LIKE TO BE REWARD PUNITIVE & MONETARY DAMAGES OF \$100,000
DUE TO THESE OFC.'S NEGLIGENCE.

SIGNED THIS 30TH day of NOVEMBER, 2016.

COREY ANDERSON #329743 #1803741
 (original signature of plaintiff)

MCI-J
P.O. BOX 549
JESSUP, MD. 20794
 (address of plaintiff)